



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

HANDWASHING

Effective Date: December 18, 2002

Policy #: IC-05

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I. PURPOSE: To prevent contamination by bloodborne pathogens. Handwashing is the single most effective deterrent to the spread of infection.

II. POLICY:

A. Hospital personnel shall wash their hands to prevent the spread of infections:

1. When coming on duty.
2. Before applying and after removing gloves.
3. When the hands are obviously soiled.
4. Between handling of individual patients.
5. Before contact about the face and mouth of patients.
6. Before and after personal use of the toilet.
7. After sneezing, coughing, blowing or wiping the nose or mouth.
8. On leaving isolation area or after handling articles from an isolation area.
9. After handling used sputum containers, soiled urinals, catheters and bedpans.
10. Before eating.
11. On completion of duty.

III. DEFINITIONS:

A. Deterrent – something that deters, to prevent or discourage.

IV. RESPONSIBILITIES:

- A. The Hospital will provide handwashing facilities. Where sinks are not practical, antiseptic towelettes, cleanser, and paper or cloth towels shall be available.
- B. The employees will advise managers directly of any locations where contamination could reasonably be expected to occur and hands cannot be cleaned in accordance with this policy.

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- A. Adjust running water to comfortable temperature and force at a level to prevent splattering water.
- B. Wash hands, vigorously scrubbing with soap for a minimum of 15 seconds. Scrub hands and lower arms downward, between fingers and around nails. Clean nails, using index finger of opposite hand. Rinse hands with fingertips downward. The friction of the skin with soap and water is essential in hand washing. Microorganisms can be harbored unless effectively removed.
- C. Dry hands and arms with a paper towel.
- D. Use paper towel to turn off faucet. All manually controlled faucets are considered contaminated.
- E. Dry hand washing utilizing an instant hand sanitizer (without water) is an acceptable alternative when soap and water are not immediately available.

VI. REFERENCES: Surveillance Prevention & Control of Infection, Medical Consultants Network, Inc. Copyright 1996.

VII. COLLABORATED WITH: Director of Nursing Services, Infection Control Coordinating Group Chair

VIII. RESCISSIONS: Policy # IC-05, *Handwashing* dated February 14, 2000; HOPP #IC-02-04, *Handwashing*, dated February 15, 1995.

IX. DISTRIBUTION: All hospital policy manuals, Exposure Control Plan Manual

X. REVIEW AND REISSUE DATE: December 2005

XI. FOLLOW-UP RESPONSIBILITY: Infection Control Nurse

XII. ATTACHMENTS: None

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Thomas Gray, MD Date
Medical Director